NOTICE OF LOSS OR DAMAGE

INSTRUCTIONS TO MEMBER: You have up to 70 days to inspect your property and note all loss or damage. Should you find any loss or damage not reported on DD Form 1840 at the time of delivery, complete Section A below. Use only ball-point pen or typewriter. THE COMPLETED FORM MUST BE DELIVERED TO YOUR LOCAL CLAIMS OFFICE NOT LATER THAN 70 DAYS FROM DATE OF DELIVERY. FAILURE TO DO SO MAY RESULT IN A REDUCTION OF THE AMOUNT PAYABLE ON YOUR CLAIM. Keep a copy of this form for your records, receipted and dated by the claims office. If more than one page is needed, please number the pages.

SECTION A - (To be completed by member)				
1. STATEMENT OF PROPERTY LOSS OR DAMAGE: You are hereby notified of the loss or damage in the following shipment of personal property.				
a. Name of Member (Last, First, Middle Initial)			b. PPGBL/Order Number	c. Date of Delivery
d Out of Share and Share (Sauce and Share)			e. Destination of Shipment (City and State/Country)	
d. Origin of Shipment (City and State/Country)			e. Described of Shipment (City and St	ate/Country)
f Vou ar	e further notified that prope	erty owner intends t	o present a claim for this loss and/o	or damage
You ar	e hereby extended an oppor	tunity to inspect the	e property.	or damage.
			uested for items listed as missing)	
a. Inv. No.	- 			
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	(NOTE: Mail original	SECTION B - (To be co to home office of carri	ompleted by claims office) er / contractor listed in item 9 on DD Fori	m 1840)
3 TO /Hom	ne Office of Carrier/Contractor)	to Home office of con-		
b Date of Dispatch				
0. 1101110 0	ind Address (Street Address) city, s	,	;	·
4. YOUR RE	PRESENTATIVE MAY CONTACT T	HIS CLAIMS OFFICE FOR	RASSISTANCE	
a. Name and Address of Claims Officer			b. Signature	
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			c. Date Signed	d. Telephone Number
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